

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

09/763917

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|   |              |              |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 65 minus 20= | * 45         |
| INDEPENDENT CLAIMS  | 14 minus 3=  | * 11         |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## 5-4-05 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT A |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * 65                             | Minus | ** 65                              | =             |
|             | Independent   | * 14                             | Minus | *** 14                             | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    | 810    |
| X100=     |        | OR | X200=     | 880    |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

SMALL ENTITY OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          | 1              | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | Minus | **                                 | =             |
|             | Independent   | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | Minus | **                                 | =             |
|             | Independent   | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

| RATE    | ADDITIONAL FEE |    | RATE   | ADDITIONAL FEE |
|---------|----------------|----|--------|----------------|
| X\$ 25= |                | OR | X\$50= |                |
| X100=   |                | OR | X200=  |                |
| +180=   |                | OR | +360=  |                |